2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006
Secretary of State

DOCUMENT# N98000003145

Entity Name: PAIDOS, INC.

Current Principal Place of Business:

10261 SW 72 STREET, UNIT # 103
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

10261 SW 72 STREET, UNIT # 103
MIAMI, FL 33173 US

New Mailing Address:

FEI Number: 65-0872356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PADRON, CARLOS E
2 ALHAMBRA PLAZA
SUITE 860
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	DP	( ) Delete
Name:	CASTELLANOS, RAIMUNDO J	
Address:	10773 SW 97TH TERRACE	
City-St-Zip:	MIAMI, FL 33176	
Title:	DVP	( ) Delete
Name:	CASTELLANOS, ANA G	
Address:	10773 SW 97TH TERRACE	
City-St-Zip:	MIAMI, FL 33176	
Title:	D	( ) Delete
Name:	ALVAREZ, EDUARDO J	
Address:	GESU CATHOLIC CHUR CH	
City-St-Zip:	MIAMI, FL 33132	
Title:	DS	( ) Delete
Name:	PADRON, RUBEN J	
Address:	11440 SW 114 CT	
City-St-Zip:	MIAMI, FL 33176	
Title:	DT	( ) Delete
Name:	FERREIRO, JOSE R JPR	
Address:	9871 NW 16TH STREET	
City-St-Zip:	PEMBROKE PINES, FL 33024	
Title:	D	( ) Delete
Name:	MENENDEZ, JOSE L	
Address:	CORPUS CHRISTI CHURCH	
City-St-Zip:	MIAMI, FL 33127	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANA G. CASTELLANOS DVP 04/03/2006

Electronic Signature of Signing Officer or Director — Date